

324-98 B3659C
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 Mar 24 1998 8:00am
 Secretary of State

MP

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **N45534** (7)
 1. Corporation Name
CALVARY CHAPEL OF PENSACOLA, INC.



Principal Place of Business Mailing Address
6330 ANTIETAM DRIVE PENSACOLA FL 32503

3. Date Incorporated or Qualified
10/07/1991

4. FEI Number **59-3088147** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business 2a. Mailing Address

21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.

22. City & State 27. City & State

23. Zip Country 28. Zip Country

24. Zip Country 25. Zip Country 29. Zip Country 30. Zip Country

9. Name and Address of Current Registered Agent

**HUGHES, I. G., JR.
 6330 ANTIETAM DRIVE
 PENSACOLA FL 32503**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City **FL** 85. Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	HUGHES, I.G., JR.	
STREET ADDRESS	6330 ANTIETAM DR.	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	SIRMON, BRADLEY D	
STREET ADDRESS	1530 ACORN LANE	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	ALVARE, CHARLES J	
STREET ADDRESS	5329 SUSSEX LANE	
CITY-ST-ZIP	PACE FL	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	VIETZKE, BOB	
STREET ADDRESS	2213 KINGFISHER COURT	
CITY-ST-ZIP	PENSACOLA FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	461 W. Roberts Rd
2.4 CITY-ST-ZIP	Cantonment, FL. 32533
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	6130 Curtis Rd
3.4 CITY-ST-ZIP	Pace, FL. 32671
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *I.G. Hughes, Jr.* I.G. HUGHES, JR. 3/17/98 (850) 494-1256

CR2E037 (10/97)